PAGE 1 / 22

Image# 202311209599189208

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORIV	1 3X	For Other	Than An Aut	horized (	Commit	tee		Office U	Jse Only	
1. NAME C	)F TEE (in full)	TYPE OR	PRINT ▼		ple: If typ the lines.	oing, type	12FE	E4M5		
WOMEN	I SPEAK OU	T PAC				1 1 1 1	1 1 1	1 1 1 1	1 1 1	, , , , <b>,</b> ,
									1 1 1	
		2776 S.	Arlington Mill Dr.							
ADDRESS (n ▼	umber and street)	# 803								
than	ck if different previously orted. (ACC)	Arlingtor	1				VA	2220	6	
2. <b>FEC ID</b>	ENTIFICATION N	UMBER ▼	CIT	ГҮ▲			STATE A		ZIP COL	DE 🛦
C	00530766			S THIS REPORT	×	NEW (N) OR		AMENDED (A)		
4. TYPE (Choose	OF REPORT One)	(b) Mor Rep Due	oort On:	20 (M2)		May 20 (M5)		Aug 20 (M8) Sep 20 (M9)	×	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Qua	rterly Reports:			20 (M4)	H	Jul 20 (M7)	H	Oct 20 (M10)	H	(Non-Election Year Only)  Jan 31 (YE)
	April 15 Quarterly Report (	Q1) (c)	12-Day		rimary (12		Ger	neral (12G)	-	Runoff (12R)
	July 15 Quarterly Report (		PRE-Election Report for the:	H	convention		=	ecial (12S)	ш	
	October 15 Quarterly Report (	Q3)	·		M = M		Y		in the	
	January 31 Year-End Report (	YE)	Election	on on	M = M				in the State of	
	July 31 Mid-Year Report (Non-election Year Only) (MY)		30-Day  POST-Election  Report for the:	G	ieneral (30	OG)	Rur	noff (30R)		Special (30S)
	Termination Repor (TER)	t	Election	on on	M = M	/ D D /	Y	( Y	in the State of	
5. Covering	Period 1	0 01		Y	through	10	/ D 31		23	
I certify that	have examined t	-		my knowle	edge and	belief it is tr	ue, correc	ct and comple	te.	
Type or Print	Name of Treasure	er Gross, c	lennifer, , ,							
Signature of	Treasurer Gro	oss, Jennifer, , ,					Date	M M / D 20		2023
NOTE: Submi	ssion of false, error	neous, or inc	omplete informatio	n may subj	ect the pe	erson signing	this Repor	t to the penalt	ies of 52	U.S.C. § 30109
Us	ice se								<b>FOR</b> IRev. 05/20	

FEC <b>Form 3X</b> (Rev. 05/2016)	SUMMARY PAGE  OF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name		
WOMEN SPEAK OUT PAC		
Report Covering the Period: From:		io: 10 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2023		1211793.15
(b) Cash on Hand at  Beginning of Reporting Period	700833.00	
(c) Total Receipts (from Line 19)	491.00	2543402.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	701324.00	3755195.16
7. Total Disbursements (from Line 31)	42683.34	3096554.50
3. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	658640.66	658640.66
Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	228556.04	
This committee has qualified as a multica	ndidate committee. (see FEC FORM 1M)	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### WOMEN SPEAK OUT PAC

10 01 2023 31 2023 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 345.00 10800.00 (i) Itemized (use Schedule A)..... 146.00 4350.00 (ii) Unitemized ..... (iii) TOTAL (add 15150.00 491.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 0.00 2472586.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 2487736.00 491.00 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 15152.29 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 13648.45 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 26865.27 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 2543402.01 12, 13, 14, 15, 16, 17, and 18(c))....... 491.00 20. Total Federal Receipts 491.00 2543402.01 (subtract Line 18(c) from Line 19) .......▶

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	Total This Period		
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Activity (from School   L/4)		Calendar Year-to-Date	
Activity (from Schedule H4)  (i) Federal Share	0.00	0.00	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.00	0.00	
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00	
Expenditures	42683.34	743474.31	
(c) Total Operating Expenditures	10000.01	740474.04	
(add 21(a)(i), (a)(ii), and (b))	42683.34	743474.31	
Committees	0.00	0.00	
Contributions to     Federal Candidates/Committees	0.00	0.00	
and Other Political Committees  Independent Expenditures	0.00	0.00	
(use Schedule E)	0.00	67330.00	
5. Coordinated Party Expenditures (52 U.S.C. § 30116(d))	222	1 1 1 1 1 1 1 1	
(use Schedule F)	0.00	0.00	
6. Loan Repayments Made	0.00	0.00	
Lagna Mada		0.00	
. Loans Made	0.00	0.00	
(a) Individuals/Persons Other Than Political Committees	0.00	50.00	
	4 4 4 4 4 4	4 1 4 1 4	
(b) Political Party Committees(c) Other Political Committees	0.00	0.00	
(such as PACs)	0.00	0.00	
(d) Total Contribution Refunds		7 7 7	
(add Lines 28(a), (b), and (c))	0.00	50.00	
. Other Disbursements (Including			
Non-Federal Donations)	0.00	2285700.19	
. Federal Election Activity (52 U.S.C. § 30101)	(20))		
(a) Allocated Federal Election Activity	X - 11		
(from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid		4 4 4	
Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00	
55 55(4)(.), 55(4)(.), 4.14 55(5))	0.00	0.00	
. Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	42683.34	3096554.50	
. Total Federal Disbursements	7 7 7 7 7		
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	42683.34	3096554.50	

#### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 05/2016)

of Disbursements

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 491.00 2487736.00 (from Line 11(d), page 3) ..... 34. Total Contribution Refunds 50.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 2487686.00 491.00 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 42683.34 743474.31 (add Line 21(a)(i) and Line 21(b)) .......▶ 37. Offsets to Operating Expenditures 13648.45 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 42683.34 729825.86 (subtract Line 37 from Line 36) ......

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

22 FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Borchert, Steven, , , Date of Receipt Mailing Address 1706 Whitby Avenue 2023 01 10 City Zip Code State Transaction ID: SA11AI.48918 MI 49024-2552 Portage Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dobrzenski, Frank, , , Date of Receipt Mailing Address 312 Altavista Loop 10 01 2023 City State Zip Code Transaction ID: SA11AI.48921 Jacksonville NC 28546-8160 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Expedient Resource Services** Principal Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Endres, Stephen, , , Date of Receipt Mailing Address 105 Charmuth Road 2023 10 08 City Zip Code State Transaction ID : SA11AI.48922 MD Lutherville 21093-5209 Amount of Each Receipt this Period FEC ID number of contributing C 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Emory Hill CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 210.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... \_\_\_

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

22 FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Hegeman, Carmen, B., , Mailing Address 809 La Cruz Drive 2023 10 10 City Zip Code State Transaction ID: SA11AI.48923 El Paso TX 79902-1720 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Attorney Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Herrema, Justin, , , Date of Receipt Mailing Address 1943 Porter Street Southwest 10 22 2023 City State Zip Code Transaction ID: SA11AI.48924 Wyoming MI 49519-2220 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self-Employed Sales Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 135.00 SUBTOTAL of Receipts This Page (optional)..... 345.00 TOTAL This Period (last page this line number only).....

### 17

SCHEDULE B (FEC Form 3X)	11		FOR LINE	E NUMBER: PAGE 8 OF 2		
		rate schedule(s) category of the	(check on			
		Summary Page	X 21b 28a		23 28c	26 27 29 30b
Any information power from such D						
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)						
WOMEN SPEAK OUT PAC						
Full Name (Last, First, Middle Initial)						
A. Anedot, Inc				Date of Disbursement		
				M M / D D / Y Y Y Y		
Mailing Address 1340 Poydras Street Suite 1770				10	31	2023
,	tate	Zip Code		FEC Ide	ntification I	Number
Tion Chicano	LA	70112				
Purpose of Disbursement			001	C		
Credit card processing fees Candidate Name				1		) : SB21B.48933
			Category/ Type	Amount	of Each D	isbursement this Period
Office Sought: House Disbursem	ent For:		- 7 7 7	1	-	19.84
	Primary	General			7	-
	Other (spec	cify) ▼		Mer	no Item	
State: District:						
Full Name (Last, First, Middle Initial)  B. Direct Average Marrie				Date of	Disbursem	ent
Birnbaum, Maria, , ,				M M	/ D D	ent
Mailing Address 2800 Shirlington Road Suite 1200	10	01	2023			
,	tate	Zip Code		FEC Ide	ntification I	Number
Arlington Purpose of Disbursement	VA	22206			-	
Benefits			001			
Candidate Name			Category/			: SB21B.48952 isbursement this Period
			Type	Amount	or Lacir D	Sociation this I chou
Office Sought: House Disbursem					7	2249.62
	Primary	General				
President State: District:	Other (spec	ary)		Mer	no Item	
Full Name (Last, First, Middle Initial)						
C. Birnbaum, Maria, , ,				Date of	Disbursem	ent
				M M	/ D D	7 7 7 7 7 7
Mailing Address 2800 Shirlington Road Suite 1200				10	06	2023
	tate	Zip Code		FEC. Ide	entification	Number
9	VA	22206				
Purpose of Disbursement			001	C		
Candidate Name						D: SB21B.48953
			Category/ Type	Amount	or Each D	isbursement this Period
Office Sought: House Disbursem	ent For:			1	-45	4394.26
	Primary	General			7-	7
	Other (spec	cify) 🔻		Mer	no Item	
State: District:						
CURTOTAL of Dishumananta This Daws (such						6663.72
SUBTOTAL of Disbursements This Page (optional)			·····•	-		7
TOTAL This Period (last page this line number only).				1 :		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate for each cate		(orlean orle)		
	Detailed Sum	mary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)	2 300	, <sub>1</sub> ,			
WOMEN SPEAK OUT PAC					
Full Name (Last, First, Middle Initial)  A. Directory Maria	<del>_</del>			Date of Disbursement	
A. Birnbaum, Maria, , ,		M M / D D / Y Y Y Y			
Mailing Address 2800 Shirlington Road Suite 1200		10 20 2023			
-		c Code 2206		FEC Identification Number	
Arlington Purpose of Disbursement	2				
Salaries & Taxes			001	C Transaction ID - SPOAD 40055	
Candidate Name		L	Category/	Transaction ID : SB21B.48955  Amount of Each Disbursement this Period	
			Type		
Office Sought: House Disbursem	_			4394.26	
	Primary Other (specify)	General			
State: District:	Other (specify)	▼		Memo Item	
Full Name (Last, First, Middle Initial)					
B. Birnbaum, Maria, , ,				Date of Disbursement	
Mailing Address 2800 Shirlington Road Suite 1200				10 31 2023	
,		o Code		FEC Identification Number	
Arlington Purpose of Disbursement	VA 2	22206			
Event ticket			001	Transaction ID + SP24B 49964	
Candidate Name	Category/ Type	Transaction ID: SB21B.48961  Amount of Each Disbursement this Period			
Office Sought: House Disbursem	_			150.00	
	Primary	General			
President State: District:	Other (specify)			Memo Item	
Full Name (Last, First, Middle Initial)  C. Gramm, Mya, , ,				Date of Disbursement	
				M M / D D / Y Y Y	
Mailing Address 2800 Shirlington Road Suite 1200				10 18 2023	
,		o Code 22206		FEC Identification Number	
Purpose of Disbursement	v/1 2			C	
Travel/Office Supplies			001	Transaction ID : SB21B.48959	
Candidate Name		\	Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursem	nent For:			255.78	
	Primary	General			
	Other (specify)	▼		Memo Item	
State: District:				_	
SUBTOTAL of Disbursements This Page (optional)			·····	4800.04	
TOTAL TILL S. L. L. W. L.					
TOTAL This Period (last page this line number only).					

SCHEDULE B (FEC Form 3X)	llea canar	ate schedule(s)		E NUMBER: PAGE 10 OF 22	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		(check only 21b	22 23 26 27	
	Dotalloa 0		28a	28b 28c 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)	o ana adare	oo or arry political		Solicit Goriniations from Sacri Committee.	
WOMEN SPEAK OUT PAC					
Full Name (Last, First, Middle Initial)					
<sup>A.</sup> Gramm, Mya, , ,				Date of Disbursement	
Mailing Address 2800 Shirlington Road Suite 1200		10 31 2023			
,	State VA	Zip Code 22206		FEC Identification Number	
Arlington Purpose of Disbursement	VA	22206			
Travel/Office Supplies			001	C	
Candidate Name				Transaction ID: SB21B.48960	
Candidate Name			Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursem	nent For		туре	264.04	
	Primary	General		7 7 7	
	Other (speci			Memo Item	
Full Name (Last, First, Middle Initial)				_	
B. Headway Workforce Solutions Inc.				Date of Disbursement	
				M M / D D / Y Y Y Y	
Mailing Address 3100 Smoketree Ct. Suite 900				10 01 2023	
,	State NC	Zip Code 27604		FEC Identification Number	
Raleigh Purpose of Disbursement	INC	27004			
Field and State Director Pay			001	C	
Candidate Name				Transaction ID : SB21B.48937	
			Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursem	nent For:		- 7	2612.30	
	Primary	General		4 4	
President	Other (speci	fy)		Management	
State: District:				Memo Item	
Full Name (Last, First, Middle Initial)				Data of Bishamana	
Headway Workforce Solutions Inc.				Date of Disbursement	
Mailing Address 3100 Smoketree Ct. Suite 900				10 01 2023	
City	State	Zip Code		FEC Identification Number	
Raleigh	NC	27604		I LO IGENUNCATION NUMBER	
Purpose of Disbursement					
Canvassing - AZ 001				Transaction ID : SB21B.48942	
Candidate Name			Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursem	nent For:	I	- 1	2250.04	
Senate	Primary	General		7 7	
President	Other (speci	fy) 🔻		Memo Item	
State: District:				Wienie Rein	
SUBTOTAL of Disbursements This Page (optional)				5126.38	
TOTAL This Period (last page this line number only).					

SCHEDULE B (FEC Form 3X)	FOR LI		INE NUMBER: PAGE 11 OF 22	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	210 28a	28b 28c 29 30b	
Any information copied from such Reports and Staten				
or for commercial purposes, other than using the name	ne and address of any politic	ed by any personal committee to	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
WOMEN SPEAK OUT PAC				
/				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
Headway Workforce Solutions Inc.			M M / D D / Y Y Y Y	
Mailing Address 3100 Smoketree Ct. Suite 900	10 01 2023			
,	State Zip Code		FEC Identification Number	
Raleigh	NC 27604			
Purpose of Disbursement		002		
Mileage		002	Transaction ID : SB21B.48947	
Candidate Name		Category/	Amount of Each Disbursement this Period	
Office Sought: House Disbursen	nent For:	Туре	94.20	
Senate	Primary General			
President	Other (specify) ▼		Memo Item	
State: District:			Memo item	
Full Name (Last, First, Middle Initial)				
Headway Workforce Solutions Inc.			Date of Disbursement	
Mailing Address 3100 Smoketree Ct. Suite 900			10 01 2023	
,	State Zip Code NC 27604		FEC Identification Number	
Raleigh Purpose of Disbursement	27004			
Field and State Director Pay		001	C	
Candidate Name		Category/	Transaction ID : SB21B.48962  Amount of Each Disbursement this Period	
		Type	Amount of Each Dispursoment this Feriod	
Office Sought: House Disbursen	nent For:		945.00	
	Primary General			
	Other (specify)		Memo Item	
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
Headway Workforce Solutions Inc.			M M / D D / Y Y Y Y	
Mailing Address 3100 Smoketree Ct. Suite 900			10 08 2023	
City	State Zip Code		FEC Identification Number	
Raleigh	NC 27604			
Purpose of Disbursement		001	C	
Field and State Director Pay Candidate Name		Category/	Transaction ID: SB21B.48938 Amount of Each Disbursement this Period	
Office Sought: House Disbursen	nent For:	Туре	2612.30	
Senate Disburseri	Primary General		7 7	
President	Other (specify)			
State: District:	- (-1 <del></del> )/ ¥		Memo Item	
SUBTOTAL of Disbursements This Page (optional)		·····	3651.50	
TOTAL This Period (last page this line number only)				

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SCHEDULE B (FEC Form 3X)	FOR LINE			NUMBER: PAGE 12 OF 22			
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check onl	<i>"</i> — ' –		06 07	
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b	
Any information conicd from such Deposits and Chalen							
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
WOMEN SPEAK OUT PAC							
Full Name (Last, First, Middle Initial)							
A. Headway Workforce Solutions Inc.				M = M	Disburseme	/ Y Y Y Y Y	
Mailing Address 3100 Smoketree Ct. Suite 900				10	08	2023	
,	state NC	Zip Code 27604		FEC Ider	ntification N	umber	
Purpose of Disbursement		27004		С			
Canvassing - AZ			001		asstien ID	: SB21B.48943	
Candidate Name			Category/			bursement this Period	
			Type				
Office Sought: House Disbursem				l L	7	3422.34	
	Primary	General					
State: District:	Other (spec	illy) $\blacktriangledown$		Mem	o Item		
Full Name (Last, First, Middle Initial)							
B. Headway Workforce Solutions Inc.				Date of I	Disburseme	nt	
				M M	/ D D	/ Y = Y = Y = Y	
Mailing Address 3100 Smoketree Ct. Suite 900		10	08	2023			
,	itate NC	Zip Code 27604		FEC Ider	ntification N	umber	
Purpose of Disbursement	110	27004		Transaction ID : SB21B.48948 Amount of Each Disbursement this Period			
Mileage			002				
Candidate Name			Category/				
			Туре			0.100	
Office Sought: House Disbursem		Canaga			7	84.30	
	Primary Other (spec	General					
State: District:	Other (spec	iiy)		Mem	o Item		
Full Name (Last, First, Middle Initial)							
C. Headway Workforce Solutions Inc.				Date of I	Disbursemen	nt	
Mailing Address 3100 Smoketree Ct. Suite 900				10	15	2023	
,	state	Zip Code		FEC Ider	ntification N	umber	
	NC	27604		C			
Purpose of Disbursement Field and State Director Pay Candidate Name  Out Category/							
						: SB21B.48939 bursement this Period	
			Type	/ inount	. Luon Dis	Darsomont tills i criod	
Office Sought: House Disbursem	ent For:			1	7	2612.30	
	Primary	General					
State: District:	Other (spec	eity) 🔻		Mem	o Item		
State. District.							
SUBTOTAL of Disbursements This Page (optional)						6118.94	
COSTOTAL OF DISDUISEMENTS THIS Page (Optional)						7-1-7-1	
TOTAL This Period (last page this line number only).							

SCHEDULE B (FEC Form 3X)	Llos concrete cohodulo(s)		NE NUMBER: PAGE 13 OF 22 only one)		
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b		
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NAME OF COMMITTEE (In Full)	The second of any point		22.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.		
WOMEN SPEAK OUT PAC					
Full Name (Last, First, Middle Initial)					
Headway Workforce Solutions Inc.	Date of Disbursement				
Mailing Address 3100 Smoketree Ct. Suite 900			10 15 2023		
City Raleigh	State Zip Code NC 27604		FEC Identification Number		
Purpose of Disbursement			C		
Canvassing - AZ		001	Transaction ID : SB21B.48944		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburser Senate		туре	3375.59		
State: District:	Primary General Other (specify) ▼		Memo Item		
Full Name (Last, First, Middle Initial)					
3. Headway Workforce Solutions Inc.			Date of Disbursement		
Mailing Address 3100 Smoketree Ct. Suite 900		10 15 2023			
Raleigh	State Zip Code NC 27604		FEC Identification Number		
Purpose of Disbursement		000			
Mileage Candidate Name	002 Category/ Type	Transaction ID : SB21B.48949 Amount of Each Disbursement this Period			
Office Sought: House Disbursen	nent For:	Type	106.20		
Senate	Primary General				
State: District:	Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)			Date of Disbursement		
Headway Workforce Solutions Inc.			M M / D D / Y Y Y Y		
Mailing Address 3100 Smoketree Ct. Suite 900			10 22 2023		
,	State Zip Code NC 27604		FEC Identification Number		
Raleigh Purpose of Disbursement	NC 27604		C		
Field and State Director Pay		001	C Transaction ID : SB21B.48940		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburser Senate	nent For: Primary General	.,,,,,	2612.30		
President	Other (specify) ▼		Memo Item		
State: District:					
SUBTOTAL of Disbursements This Page (optional)			6094.09		
TOTAL This David destruction that I'm a second to the second seco					
<b>TOTAL</b> This Period (last page this line number only)					

	CHEDULE B (FEC Form 3X)	Hee con-	rato cobodula(a)		NUMBER: PAGE 14 OF 22	
IT	EMIZED DISBURSEMENTS	for each of	rate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c 29 30b	
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	for commercial purposes, other than using the name					
$\overline{\ }$	NAME OF COMMITTEE (In Full)					
$\rangle$	WOMEN SPEAK OUT PAC					
_	Full Name (Last, First, Middle Initial)					
Α.	Headway Workforce Solutions Inc.				Date of Disbursement	
	Mailing Address 3100 Smoketree Ct. Suite 900		10 22 2023			
	City State of the City State o	State NC	Zip Code 27604		FEC Identification Number	
	Purpose of Disbursement		27004			
	Canvassing - AZ			001	C	
	Candidate Name		l		Transaction ID : SB21B.48945	
	oundate numb			Category/ Type	Amount of Each Disbursement this Period	
	Office Sought: House Disbursen	nent For:		1,400	3462.58	
	Senate	Primary	General		7 7 7	
	President State: District:	Other (spec	ify) ▼		Memo Item	
	Full Name (Last, First, Middle Initial)					
3.	Headway Workforce Solutions Inc.				Date of Disbursement	
	Mailing Address 3100 Smoketree Ct. Suite 900				10 22 2023	
	-	State	Zip Code		FEC Identification Number	
	Raleigh	NC	27604			
	Purpose of Disbursement			002	C	
	Mileage Candidate Name		I.		Transaction ID : SB21B.48950	
				Category/ Type	Amount of Each Disbursement this Period	
	Office Sought: House Disbursen	nent For:		Турс	129.00	
		Primary	General		7 7 7	
		Other (spec				
	State: District:	· · ·	,,		Memo Item	
_	Full Name (Last, First, Middle Initial)				Date of Disbursement	
С.	Headway Workforce Solutions Inc.				M M / D D / Y Y Y Y	
	Mailing Address 3100 Smoketree Ct. Suite 900				10 29 2023	
		State	Zip Code		FEC Identification Number	
	Raleigh	NC	27604			
	Purpose of Disbursement Field and State Director Pay			001	C	
	Candidate Name		l	Category/	Transaction ID: SB21B.48941 Amount of Each Disbursement this Period	
	Office Sought: House Disbursen	nont For:		Туре	2612.30	
	Senate Disburseri	Primary	General		7 7 7	
	President	Other (spec			п.,	
	State: District:	Salor (Spec			Memo Item	
_					6203.88	
S	UBTOTAL of Disbursements This Page (optional)			······	5255.50	
т	OTAL This Period (last page this line number only)					
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	OR LINE NUMBER: PAGE 15 OF 22		
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X   21b   28a	22 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)	una udanese er un, penne	<u></u>			
WOMEN SPEAK OUT PAC					
Full Name (Last, First, Middle Initial)					
Headway Workforce Solutions Inc.	Date of Disbursement				
Mailing Address 3100 Smoketree Ct. Suite 900			10 29 2023		
City Raleigh	State Zip Code NC 27604		FEC Identification Number		
Purpose of Disbursement			C		
Canvassing - AZ		001	Transaction ID : SB21B.48946		
Candidate Name		Category/	Amount of Each Disbursement this Period		
Office Sought: House Disbursen	nent For:	Туре	3606.49		
	Primary General				
State: District:	Other (specify) ▼		Memo Item		
Full Name (Last, First, Middle Initial)					
B. Headway Workforce Solutions Inc.			Date of Disbursement		
Mailing Address 3100 Smoketree Ct. Suite 900			10 29 2023		
,	State Zip Code NC 27604		FEC Identification Number		
Purpose of Disbursement			C		
Mileage Candidate Name	002 Category/ Type	Transaction ID : SB21B.48951 Amount of Each Disbursement this Period			
Office Sought: House Disbursen	nent For:	Туре	108.30		
	Primary General				
State: President State:	Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)			Date of Disbursement		
Mesa, Matthew, , ,			M M / D D / Y Y Y Y		
Mailing Address 2800 Shirlington Road Suite 1200			10 31 2023		
,	State Zip Code		FEC Identification Number		
Arlington Purpose of Disbursement	VA 22206				
Travel/Office Supplies		001	C Transaction ID : SB21B.48956		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disbursen	nent For:	.,,,,	287.90		
Senate	Primary General		7 7 7		
President	Other (specify) ▼		Memo Item		
State: District:					
SUBTOTAL of Disbursements This Page (optional)			4002.69		
			12221 2:		
TOTAL This Period (last page this line number only)			42661.24		

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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	X	10

22

NAME OF COMMITTEE (In Full)

A 5 11 N	0 1"		
A. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose):  Credit Card Expense		
American Express			Ordan Cara Expense
Mailing Address Three World Financial Center 200 Vesey Street			
City	State	Zip Code	
New York	NY	10285	
Outstanding Balance Beginning This Period			Transaction ID : SD10.48906
1731.06			
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
0.00	1	0.00	1731.06
B. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor		Nature of Debt (Purpose):
American Express			Credit Card Expense
Mailing Address Three World Financial Center 200 Vesey Street			
City	State	Zip Code	
New York	NY	10285	
Outstanding Balance Beginning This Period			Transaction ID : SD10.48964
0.00			
Amount Incurred This Period Payment This Period			Outstanding Balance at Close of This Period
16217.80	1 1 7	0.00	16217.80
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
American Marketing & Publishing	g, Inc.		Non-Federal Doorhangers - AZ
Mailing Address 2012 Stonewater Ct			
City	State	Zip Code	
Hoschton	GA	30548	
Outstanding Balance Beginning This Period			Transaction ID : SD10.48912
14400.00			
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
0.00	<del></del>	0.00	14400.00
SUBTOTALS This Period This Page (optional)		<b></b>	32348.86
			7 7 7 7
TOTALS This Period (last page this line number only)			
TOTAL OUTSTANDING LOANS from Schedule C (last page only)			
ADD 2) and 3) and carry forward to appropriate lin	ne of Summa	ary Page (last page only) ▶	

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

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OF

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22

**X** 10 NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Dentons US LLP Mailing Address 1900 K Street NW State Zip Code Washington DC 20006 Transaction ID: SD10.48875 Outstanding Balance Beginning This Period 1260.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1260.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Dentons US LLP Mailing Address 1900 K Street NW City State Zip Code 20006 Washington DC Outstanding Balance Beginning This Period Transaction ID: SD10.48935 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 420.00 420.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Cloud Computing Subscription Gsuite Mailing Address 1600 Amphitheatre Parkway City State Zip Code Mountainview CA 94043 Outstanding Balance Beginning This Period Transaction ID: SD10.48075 1488.24 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 1488.24 0.00 3168.24 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 18 OF
FOR LINE NUMBER:
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22

NAME OF COMMITTEE (In Full)

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A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Media Bridge			Estimate digital ads
	_		
Mailing Address 11300 Astarita Ave			
City	State	Zip Code	
Partlow	VA	22534	
Outstanding Balance Beginning This Period			Transaction ID : SD10.15740
2000.00			
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
0.00		0.00	2000.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			payroll, travel, rent, IT security, consulting, database, office supplies
Mailing Address 2776 S. Arlington Mill Dr. # 803			
City # 803	State	Zip Code	
Arlington	VA	22206	
Outstanding Balance Beginning This Period			Transaction ID : SD10.43634
7561.68			
Amount Incurred This Period Payment This Period			Outstanding Balance at Close of This Period
0.00	· · · · ·	0.00	7561.68
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			payroll, travel, rent, IT security, consulting, database, office supplies
Mailing Address 2776 S. Arlington Mill Dr. # 803			
City	State	Zip Code	
Arlington	VA	22206	
Outstanding Balance Beginning This Period 40501.40			Transaction ID : SD10.44496
7 7	5		
Amount Incurred This Period	Pay	yment This Period	Outstanding Balance at Close of This Period
0.00	7	0.00	40501.40
SUBTOTALS This Period This Page (optional)		)	50063.08
TOTALS This Period (last page this line number	only)	)	
TOTAL OUTSTANDING LOANS from Schedule (	C (last page o	nly)	
ADD 2) and 3) and carry forward to appropriate	line of Summa	ary Page (last page only)	

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

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9 **X** 10

22

NAME OF COMMITTEE (In Full)
WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Susan B Anthony List, Inc.	Direct Mail		
			_
Mailing Address 2776 S. Arlington Mill Dr. # 803			
City	State	Zip Code	
Arlington	VA	22206	
Outstanding Balance Beginning This Period			Transaction ID : SD10.44823
9459.42			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	9459.42
		<del></del>	7 7 7
B. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			payroll, travel, rent, IT security, consulting, database, office supplies
Mailing Address 2776 S. Arlington Mill Dr. #803			
City	State	Zip Code	
Arlington	VA	22206	
Outstanding Balance Beginning This Period			Transaction ID: SD10.45454
18037.00			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	18037.00
7 7 7		7 7	4 4
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			payroll, travel, rent, IT security, consulting, database, office supplies
Mailing Address 2776 S. Arlington Mill Dr.			
# 803			
City	State VA	Zip Code 22206	
Arlington	VA	22200	
Outstanding Balance Beginning This Period			Transaction ID : SD10.45455
29432.00			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	29432.00
NOTIFICATION This Period This Perso (options)			56928.42
) SUBTOTALS This Period This Page (optional)			4 4
TOTALS This Period (last page this line number o	nly)	<b>&gt;</b>	
TOTAL OUTSTANDING LOANS from Schedule C	(last page c	only)	
) ADD 2) and 3) and carry forward to appropriate lin	ne of Summ	ary Page (last page only) ▶	

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 20 OF
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NAME OF COMMITTEE (In Full)

WOMEN	<b>SPEAK</b>	OUT	PAC
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IA EUN A LE LABOR LE LA COLO	0 !!!		
A. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose):		
Susan B Anthony List, Inc.			Payroll and Consulting
Mailing Address 2776 S. Arlington Mill Dr.			
# 803 City	State	Zip Code	
Arlington	VA	22206	
Outstanding Balance Beginning This Period		1	Transaction ID : SD10.47259
23030.96			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00	7	0.00	23030.96
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			Payroll, travel, fees, rent, IT security, consulting, database, office supplies
Mailing Address 2776 S. Arlington Mill Dr. #803			
City Arlington	State VA	Zip Code 22206	
Outstanding Balance Beginning This Period	·	·	Transaction ID : SD10.47261
17080.78			
Amount Incurred This Period Payment This Period			Outstanding Balance at Close of This Period
0.00		0.00	17080.78
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			Shared expenses
Mailing Address 2776 S. Arlington Mill Dr. #803			
City	State VA	Zip Code 22206	
Arlington	VA	22200	
Outstanding Balance Beginning This Period 1256.68			Transaction ID : SD10.47260
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00	7	0.00	1256.68
SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	41368.42
TOTALS This Period (last page this line number	only)	<b>&gt;</b>	
TOTAL OUTSTANDING LOANS from Schedule C	C (last page o	nly)	
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**Excluding Loans** 

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22

NAME OF COMMITTEE (In Full)

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VOWEN SPEAR OUT PAC			
A. Full Name (Last, First, Middle Initial) of Debtor (	Nature of Debt (Purpose):		
Susan B Anthony List, Inc.	Payroll, travel, fees, rent, IT security, consulting, database, office supplies		
Mailing Address 2776 S. Arlington Mill Dr. # 803			
City	State	Zip Code	
Arlington	VA	22206	
Outstanding Balance Beginning This Period			Transaction ID : SD10.48262
17179.55			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	17179.55
B. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			Texting - non-federal expenditure
Mailing Address 2776 S. Arlington Mill Dr.			_
# 803			
City	State VA	Zip Code 22206	
Arlington	VA	22200	
Outstanding Balance Beginning This Period			Transaction ID : SD10.48363
311.59			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00			311.59
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			Payroll, travel, fees, rent, IT security, consulting, database, office supplies
Mailing Address 2776 S. Arlington Mill Dr.			
# 803 City	State	Zip Code	
Arlington	VA	22206	
Outstanding Balance Beginning This Period	•	•	Transaction ID : SD10.48344
22311.56			
Amount Incurred This Period	Pay	yment This Period	Outstanding Balance at Close of This Period
	ra		
0.00		0.00	22311.56
SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	39802.70
TOTALS This Period (last page this line number of			
TOTAL OUTSTANDING LOANS from Schedule C			
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**Excluding Loans** 

(Use separate schedule(s) for each

FOR LINE NUMBER: (check only one)

PAGE

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OF

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numbered line) **X** 10 NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payroll, travel, fees, rent, IT security, Susan B Anthony List, Inc. consulting, database, office supplies Mailing Address 2776 S. Arlington Mill Dr. # 803 State Zip Code Arlington VA 22206 Transaction ID: SD10.48729 Outstanding Balance Beginning This Period 4876.32 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4876.32 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Outstanding Balance at Close of This Period Payment This Period Amount Incurred This Period 4876.32 1) SUBTOTALS This Period This Page (optional)..... 228556.04 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 228556.04 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶